

P13000082590

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



200251133152

200251133152  
08/28/13--01028--014 \*\*105.00

FILED  
13 OCT -7 PM 4:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MRD  
10/8/13

18613118667

**COVER LETTER**

**TO:** Charter Section  
Division of Corporations

**SUBJECT:** RB INDEPENDENT, INC.

Name of Resulting Florida Profit Corporation

The enclosed Certificate of Conversion, Articles of Incorporation, and fees are submitted to convert an "Other Business Entity" into a "Florida Profit Corporation" in accordance with s. 607.1115, F.S.

Please return all correspondence concerning this matter to:

William G. Morris

Contact Person

Law Offices of William G. Morris

Firm/Company

247 N. Collier Blvd., Suite 202

Address

Marco Island, FL 34145

City, State and Zip Code

wgmorrislaw@embarqmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

William G. Morris at (239) 642-6020

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$105.00 Filing Fees

☐ \$113.75 Filing Fees  
and Certificate of  
Status

☐ \$113.75 Filing Fees  
and Certified Copy

☐ \$122.50 Filing Fees,  
Certified Copy, and  
Certificate of Status

**STREET ADDRESS:**

Charter Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

Charter Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 4, 2013

WILLIAM G. MORRIS  
LAW OFFICES OF WILLIAM G MORRIS  
247 N. COLLIER BLVD., SUITE 202  
MARCO ISLAND, FL 34145

SUBJECT: RB INDEPENDENT, INC  
Ref. Number: W13000048667

RECEIVED

SEP 09 2013

WILLIAM G. MORRIS, ESQ

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

13 OCT -7 PM 3:11

RECEIVED

We have received your document for RB INDEPENDENT, INC and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 608.4403, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by a member or an authorized representative of a member. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

You must submit Articles of Incorporation for a Florida profit corporation along with the Certificate of Conversion. The Articles of Incorporation must be signed by an incorporator.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Ruby Dunlap  
Regulatory Specialist II  
New Filing Section

Letter Number: 313A00020748

**Certificate of Conversion**  
For  
**"Other Business Entity"**  
Into  
**Florida Profit Corporation**

FILED  
13 OCT -7 PM 4: 15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

This Certificate of Conversion and attached Articles of Incorporation are submitted to convert the following "Other Business Entity" into a Florida Profit Corporation in accordance with s. 607.1115, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:

**RB INDEPENDENT, LLC** L13600055230

Enter Name of Other Business Entity

2. The "Other Business Entity" is a **Limited Liability Company**  
(Enter entity type. Example: limited liability company, limited partnership, general partnership, common law or business trust, etc.)

first organized, formed or incorporated under the laws of **Florida**  
(Enter state, or if a non-U.S. entity, the name of the country)

on **April 15, 2013**

Enter date "Other Business Entity" was first organized, formed or incorporated

3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:

4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:

**RB INDEPENDENT, INC**

Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: \_\_\_\_\_  
(The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Incorporation, if an effective date is listed therein.)

Signed this 30<sup>th</sup> day of September, 2013 FILED  
13 OCT -7 4:15

**Required Signature for Florida Profit Corporation:**

Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator:

\* Printed Name: Rachelle M. Boff Title: President

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**Required Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]**

Signature: Rachelle M. Boff  
Printed Name: Rachelle M. Boff Title: Manager

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

**If Florida General Partnership or Limited Liability Partnership:**

Signature of one General Partner.

**If Florida Limited Partnership or Limited Liability Limited Partnership:**

Signatures of ALL General Partners.

**If Florida Limited Liability Company:**

Signature of a Member or Authorized Representative.

**All others:**

Signature of an authorized person.

**Fees:**

Certificate of Conversion:	\$35.00
Fees for Florida Articles of Incorporation:	\$70.00
Certified Copy:	\$8.75 (Optional)
Certificate of Status:	\$8.75 (Optional)

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**FILED**

**ARTICLE I NAME**

The name of the corporation shall be: RB INDEPENDENT, INC.

13 OCT -7 PM 4: 15

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal street address

Mailing address, if different is:

247 N. Collier Blvd., Suite 202

Marco Island, FL 34145

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Any and all lawful lbusiness

**ARTICLE IV SHARES**

The number of shares of stock is: 1000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Rachelle Boff, President

Name and Title: \_\_\_\_\_

Address: 1 Franklin Sq., Apt. 1  
Saratoga Springs, NY 12866

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: William G. Morris

Address: 247 N. Collier Blvd., Suite 202  
Marco Island, FL 34145

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: William G. Morris  
Address: 247 N. Collier Blvd., Suite 202  
Marco Island, FL 34145

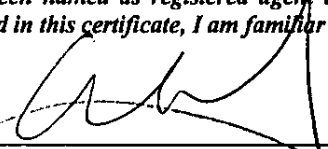
FILED

13 OCT -7 PM 4: 15

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA


\*\*\*\*\*

*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

  
\_\_\_\_\_  
Required Signature/Registered Agent

9/30/13  
Date

*I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

  
\_\_\_\_\_  
Required Signature/Incorporator

9/30/13  
Date